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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/598,841	09/13/2006	Richard John Sciotti		PC32210	5Λ	1118	
TITLE OF INVENTION: SUBSTITUTED IMIDAZO[1,2-A]PYRIDINES AS ANTIBACTERIAL AGENTS							
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	E FEE TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$ 0	3	1810	07/09/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
MOORE, SUSANNA 1624			514-233200				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Gregg C. Benson							
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form			or agents OR, alternatively,				
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Pfizer Inc. New York, NY							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
☐ A check is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.							
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Typed or printed name	7	xon	Registration No. 32,410				
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